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Order the Laperwork Reduction?	o iespo	sporta to a collection of information unless it displays a valid OMB control number						
	on 12/08/2004. ad Appropriations Act. 2005 (H.R. 4818)			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/596,840				
FEE TRANSMITTAL			, F	iling Date	June 27, 2006			
For FY 2006			Fi	irst Named Inventor	Guy Lafon			
Applicant claims small entity status. See 37 CFR 1.27				xaminer Name	TBA			
Applicant claims small en	IIIy status.	See 37 CFR 1.27	A	rt Unit	2836			
TOTAL AMOUNT OF PAYME	NT (\$)	250.00	Α	ttorney Docket No.	149659.00	0002		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 50-1429 Deposit Account Name: Powell Goldstein LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARC	H, AND E	KAMINATION FEE						
	FILING FEES S Small Entity			H FEES EXA Small Entity	MINATION FEES Small Entity			
Application Type			e (\$)		(\$) <u>Fee</u>		es Paid (\$)	
Utility	300	150 50	00	250 20	0 100			
Design	200	100 10	00	50 13	0 6:	5		
Plant	200	100 30	00	150 16	60 80)		
Reissue	300	150 50	00	250 60	00 300	· · ·		
Provisional	200	100	0	0	0 (O		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Small E Fee (\$) Fee (\$) 50 25							(\$)	
Each independent claim over 3 (including Reissues) 200							00	
Multiple dependent claims						360 18	30	
						ultiple Depender		
- 20 or HP = HP = highest number of total cli Indep. Claims - 3 or HP =	aims paid for, xtra Claim		Fee P	aid (\$)	<u></u>	Fee (\$) Fe	ee Paid (\$)	
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof 100 = /50 = (round up to a whole number) x =								
- 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)	
Other (e.g., late filing surcharge): Late Filing Surcharge (\$130) and Extension of Time (\$120)							250.00	
SUBMITTED BY								
Signature Registration No. 31,236 Telephone 404-572-							572-6900	
Name (Print/Type) Jeson A Bernstein / Date January 26, 2007							6, 2007	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.